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PATENT APPLICATION FEE DETERMINATION Substitute for Form PTO-875							ORD		Application or Docket Number			
CLAIMS AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN SMALL ENTITY		
	FOR	NUMBE	NUMBER FILED NUMB		ER EXTRA	F	RATE FEE			RATE	FEE	
	SIC FEE CFR 1.16(a))		7					<sub>\$</sub> 385	OR		\$	
	AL CLAIMS CFR 1.16(c))	11	minus 20	0	x \$_	=	0	OR	x \$ =			
	EPENDENT CLAIMS CFR 1.16(b))	1	minus 2	0= . 0	, . 0			0	OR	× \$=		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ \$_	=	0	OR	+ s =		
* If the difference in column 1 is less than zero, enter "0" in column 2.						Т	OTAL	385	OR	TOTAL		
CLAIMS AS AMENDED – PART II												
									OR		RTHAN	
_	(Column 1) (Column 2) (Column 3)				(Column 3)	<u>`</u>	SMALL ENTITY			SMALL	ENTITY	
A TNE		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total * (37 CFR 1.16(c))		Minus	**	=	x \$_	=		OR	x \$=		
	Independent * (37 CFR 1.16(b))		Minus	***	=	× \$_			OR	x \$=		
⋛	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$			OR	+s =		
						TOT.	AL 'L FEE		OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)											_	
AMENDMENT B	7.11 <u>- 1</u>	CLAIMS REMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL _FEE	
M	Total * (37 CFR 1.16(c))		Minus	**	=	x \$_	=_		OR	x \$=		
Π̈́	Independent (37 CFR 1.16(b))		Minus	***	=	x \$_	=_		OR	x \$=		
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$_	_=		OR	+\$ =		
						TOT.	AL 'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)							
ENTC		CLAIMS REMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
JME	Total * (37 CFR 1.16(c))		Minus	**	=	× \$_	=		OR	x \$=		
AMENDMEN	Independent * (37 CFR 1.16(b))		Minus	***	=	× \$_	=		OR	x \$=		
AM	FIRST PRESENTATI	ON OF MULTIPLE	E DEPENDE	NT CLAIM (37 CF	R 1.16(d))	+ \$	=		OR	+ 5 =		
							AL 'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".												

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10624003

(Column 1) (Column 2)							SMALL ENTITY TYPE 1		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			11				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED NUMBER		ER EXTRA	8	ASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			minus 20=  *				X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	minus 3 = *					X42=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	ESENT			T	+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2		TOTAL	375	OR	TOTAL	
	С	LAIMS AS A	MENDE	D - PART II							OTHER THAN	
(Column 1)				(Colum		(Column 3)		SMALL E	را بيد الكان بيد الكان	OR	SMALL	
AMENDMENT A		CLAMS REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S S S	Total	*	Minus	** .	·····	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CL AINA	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
							<b>L</b>	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	ger e parase
		(Column 1)		(Colum	n 2)	(Column 3)	,,,,	)				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF M	Minus	***	CL AIRA	=		X42=		OR	X84=	
_	FINST PRESE	INTATION OF MI	JETIPLE DE	·	CLANVI		1	+140=	*	OR	+280=	
								TOTAL DDIT. FEE			TOTAL ADDIT. FEE	
		(Column 1)		(Colum	n 2)	(Column 3)		JOH. 1 CE				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLÝ	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	$\prod$	X\$ 9≃		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	. 10
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					1						
*	If the entry in colu	ımn 1 is less than t	ne entry in co	olumn 2, write '	"0" in co	lumn 3.	L	+140= TOTAL		OR	+280=	
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												